

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO.  | DATE     |
|---------------------------|----------|---------|----------|
| FEE DETERMINATION         |          |         |          |
| O.I.P.E. CLASSIFIER       |          | 10      | 1-10-01  |
| FORMALITY REVIEW          | 132      | JC3-883 | 01-19-01 |
| RESPONSE FORMALITY REVIEW |          |         |          |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date     |
|----------|----------|
| Final    |          |
| Original |          |
| 1        | 12/02/00 |
| 2        | 12/02/00 |
| 3        | 12/02/00 |
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| Claim    | Date |
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| Claim    | Date |
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| Final    |      |
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If more than 150 claims or 10 actions  
staple additional sheet here